PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003									1575-0153P				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL	THAN	
TOTAL CLAIMS			2				RAT	Έ	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			2 - minus 20=		*6		X\$ 9)= 		OR	X\$18=		
INDEPENDENT CLAIMS			1 - minus 3 =		*6		X42				X84=	<u> </u>	
MU	LTIPLE DEPEN	IDENT CLAIM PI			1			.= 		OR	∧o4=		
<u> </u>							+140)=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT	٩L		OR	TOTAL	ZOCO	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								LLI	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=		
	Independent	*	Minus	***		=	X42	=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										. 200		
							+140)= TAL		OR	+280= TOTAL		
							ADDIT.			OR	ADDIT FEE		
ENDMENT B	-	(Column 1) CLAIMS		(Colur		(Column 3)			ADDI-	i		ADDI	
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RAT	Ε	TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=		
AME	Independent	*	Minus	***		=	X42	=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										UR			
							+140			OR	+280=		
						ADDIT.	FEE		OR	TOTAL ADDIT. FEE			
		(Column 1) CLAIMS		(Colur		(Column 3)							
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=	- · - - -	
ME	Independent	*	Minus	***		=	X42				X84≈		
lacksquare	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM	CLAIM		\dashv		OR	∧04≈		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	ent) is the	an 3, enter 3. e highest number	found in th	e apı	oropriate box	x in co	lumn 1.		

Application or Docket Number